

SAN ANTONIO UNIFORMED SERVICES HEALTH EDUCATION CONSORTIUM
(SAUSHEC) POLICY ON PROCEDURES FOR ADDRESSING
RESIDENT CONCERNS & GRIEVANCES

I. Purpose. This policy is designed to insure that SAUSHEC meets the ACGME requirements to provide an educational environment in which residents may raise and resolve issues without fear of intimidation or retaliation. This includes the following:

A. Provision of an organizational system for residents to communicate and exchange information on their working environment and their educational programs. SAUSHEC's organizational structure is outlined in the SAUSHEC Bylaws and includes Housestaff Councils at each of its member hospitals. In addition, there is active resident participation on key hospital committees (including the GMEC). Other mechanisms to accomplish this goal are outlined in this policy.

B. Insuring there is a process by which individual residents can address concerns in a confidential and protected manner. This requirement is addressed in this policy

C. Establishment and implementation of fair institutional policies and procedures for academic or other disciplinary actions taken against residents. These issues are addressed in the SAUSHEC Due Process Policy for residents.

D. Establishment and implementation of fair institutional policies and procedures for adjudication of resident complaints and grievances related to actions which could result in dismissal, non-renewal of a resident's contract, or other actions that could significantly threaten a resident's intended career development. These issues are addressed in this policy as well as in the SAUSHEC Due Process Policy for residents.

II. Procedures. This policy outlines the various procedures available to SAUSHEC residents to address and resolve their grievances/concerns. Before seeking formal assistance, the resident should speak with the person(s) involved with his or her grievances/concerns to try to resolve the issue directly. If the resident cannot resolve the issue in this manner, he/she may pursue resolution through the avenues delineated in this policy.

A. Residency program options. When possible, resolution should be accomplished at the program level through the program director, faculty advisors or other program faculty.

1. At the start of the residency each resident should be assigned a staff advisor (which may be the program director) by the program director. The advisor should create an appropriate atmosphere for free, confidential (when appropriate) communication with the resident without fear or intimidation.

2. Although the resident will usually consult with his or her advisor as the first step in addressing concerns or grievances, the resident may use any of the program's faculty or senior residents with whom the resident feels comfortable or if the advisor is not available or there is a conflict of interest with the issue under consideration.

3. The resident can always discuss any issue with his/her Program Director who will have an open door policy and will ensure no recrimination is taken against the resident as a result of the meeting and that confidentiality of the meeting is maintained to the extent permitted by law and regulation.

4. At any time the resident feels his/her issue cannot be addressed at the program level, the resident should use one of the resolution mechanisms outlined below.

B. SAUSHEC Ombudsman Program. The Dean will appoint a minimum of four SAUSHEC ombuds and ensure they have appropriate training and authority commensurate with their responsibilities as outlined below. They will be advisors to the GMEC.

1. At any time the resident, or a representative authorized by the resident, may consult with a SAUSHEC ombudsman who functions as an independent, neutral, confidential and informal resource for assistance and guidance. The ombuds' mission is to consider the rights and interests of individuals and to advocate fairness and equal treatment for all concerned. The ombuds will listen to the resident's concerns, clarify issues of policy and procedures, discuss options and jointly with the resident, will determine the best course of action to take to resolve the issue(s). The ombuds will work with the resident until the issue is resolved or until the resident no longer requires the assistance of the ombuds.

2. The ombuds may have access to any supervisory/command level within SAUSHEC or its member institutions and are not bound by any specific supervisory authority or chain of command while doing ombuds duties.

3. The ombuds will respect resident confidentiality and protect the resident's identity except to the extent required by law or service regulation that includes, but is not limited to, the requirement to protect resident &/or patient safety.

4. The ombuds system does not replace the existing formal complaint processes available in SAUSHEC Military Treatment Facilities (MTFs). Instead, the ombuds system is a complementary service and facilitates access and referral to existing agencies and processes. The services provided by the ombuds do not replace or supersede the provisions of the SAUSHEC due process policy.

C. Housestaff Councils of Brooke Army Medical Center (BAMC) and Wilford Hall Medical Center (WHMC). Both BAMC and WHMC have active Housestaff councils with elected officers and Graduate Medical Education Committee (GMEC) representation.

These committees may serve as a venue for an individual resident to bring his/her issues to the attention of SAUSHEC leadership.

D. SAUSHEC Resident Issues Sub Committee and ad hoc committees.

1. SAUSHEC Resident Issues Sub Committee is a standing subcommittee of the GMEC that is charged with addressing Housestaff issues for the GMEC and the Dean. Resident members of the GMEC are members of this subcommittee. Resident issues may be brought to this committee to bring to the attention of the Dean and/or the GMEC.

2. At the request of a resident, an ombuds, the Resident Issues Subcommittee, the GMEC or a Housestaff Council, the Dean, when appropriate, can authorize an ad hoc committee of impartial faculty and residents to review and arbitrate any concerns/grievances of a group of residents or an individual resident. This committee will make recommendations to the Dean and/or the GMEC with the full knowledge of the resident involved. The Dean and/or the GMEC will ensure the concern/grievance is resolved in the most appropriate manner possible.

E. Dean and Associate Deans of SAUSHEC. The SAUSHEC Dean and Associate Deans for GME at BAMC & WHMC all have “open door” policies for residents and are willing to meet with residents at any time to discuss any issues or concerns. The Dean and Associate Deans will ensure no recrimination is taken against the resident as a result of the meeting and that confidentiality of the meeting is maintained to the extent permitted by law and regulation.

F. Human Relations Advisor (HRA) of WHMC and Company Commander of BAMC. The HRA is a neutral party appointed by the Commander, 59th Medical Wing (WHMC) to informally resolve issues at the lowest level and to identify barriers and corrective measures to the effective functioning of all personnel within WHMC. Specific areas of interest include interpersonal relations, workplace diversity issues such as communication, trust, respect, recognition, opportunities for advancement and prevention of workplace discrimination and sexual harassment. The HRA manages the Alternative Dispute Resolution (ADR) Program and employs a variety of conflict resolution methods. At BAMC, the company commander has resources that perform similar functions to the HRA for the BAMC commander.

G. Military Equal Opportunity Office (WHMC) and Equal Opportunity Advisor (BAMC). The offices of the MEOO/EOA are command-authorized entities that conduct formal complaint processes addressing issues of sexual harassment and discrimination on the basis of race, color, ethnic group, religion and sex. A formal investigation (issues clarification) is conducted to determine the facts surrounding the allegations.

H. Inspector General (IG). The IG is designated by the Air Force and Army as the office of primary responsibility for addressing allegations of fraud, waste and abuse, and violation of published standards/regulations. The IG is also responsible for addressing

allegations of reprisal. Reprisal is defined as taking or threatening to take an unfavorable personnel action or withholding or threatening to withhold a favorable personnel action against a military member for making or preparing a protected disclosure. Protected disclosure is a lawful communication to a member of the Congress, IG or a member of a Department of Defense (DOD) audit, inspection, investigation or law enforcement organization. Other protected disclosures include those made within other established Air Force or Army grievance channels (to include MEOO/EOA) in which the military member makes a complaint or discloses information the military member believes is a violation of a policy or regulation.

I. Area Defense Counsel (ADC). The ADC exists to provide confidential legal advice to military members including SAUSHEC residents.

J. Chaplain. Residents may seek confidential counsel with the BAMC or WHMC chaplains who are available after hours for emergent consultation.

K. Mental Health resources. Residents may choose to address their concerns with a mental health provider or clinic, which are available at BAMC and WHMC. Available services include stress management classes, depression management, anxiety management, medication management, individual therapy, group therapy, and marital therapy. The Dean's office can facilitate this type of assistance, if desired, for the resident.

1. Program directors will ensure that resident has sufficient opportunity in the work schedule to attend mental health appointments without recrimination.

2. In the DOD confidentiality of mental health care is protected unless the individual seeking information has a legitimate need to know and is authorized by regulation or law to access this information. The mental health provider releases only enough information to satisfy the need and makes every effort to protect private, personal details. The resident of course may choose to authorize release of mental health information.

3. For emergent mental health concerns the resident may seek evaluation and mental health support at any Emergency Department at any time. Authority for directed mental health evaluations rests only with the Commander, or his/her designee, of the resident's MTF who must follow explicit DOD procedures to protect the rights of military members including SAUSHEC residents.